## Harnett County Department of Public Health

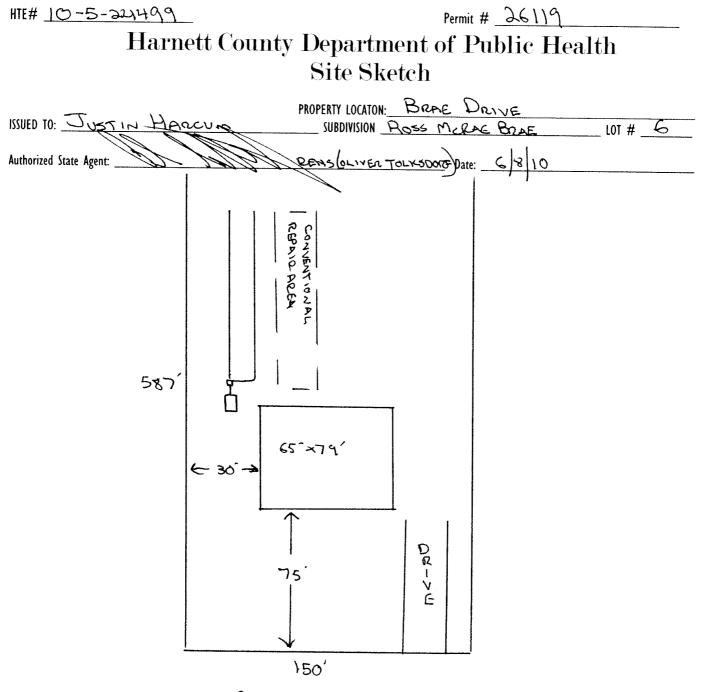
HTE# 10-5-24499

26119

## **Improvement** Permit

A	building permit cannot be issued w	ith only an Im	- 1provement	Permit	
ISSUED TO: JUSSIN & HARCU	PROPERTY LO	CATION: B	RAE 1	DRIVE	
NEW X REPAIR C EXPANSIO		Charles 1	MCKA	E DRAE	LOT # <u>6</u>
Type of Structure: SFO(65 - 39)		site improvi	rements requ	uired prior to Construction Autho	rization Issuance:
Proposed Wastewater System Type: CONVENTI	ONAL				
Projected Daily Flow: <u>360</u> GPD	_				
Number of bedrooms: <u></u> Number of Occu	pants: <u>6</u> max				
Basement 🗆 Yes 🗶 No					
Pump Required: 🗆 Yes 🛛 No 🔅 May be requ	ired based on final location and ele	vations of facili	ities		<b>.</b> .
Type of Water Supply:  Community  Public	□ Well Distance from well _	100	feet	Permit valid for:	Five years
Permit conditions:	······································				No expiration
	<u> </u>				
Authorized State Agent:	REHS Date:	61811	<i>m</i>		
The issuance of this permit by the Health Department in no way guara	ntees the issuance of other permits. The permit	G 8 10	<u>U</u> nrible for check	SEE ATT	ACHED SITE SKETCH
site is subject to revocation if the site plan, plat, or the intended use i	nanges. The Improvement Permit shall not be	affected by a cha	ange in owners	ship of the site. This permit is subject to	compliance with the provisions of
the Laws and Rules for Sewage Treatment and Disposal and to condition	is of this permit.				in the presidents of
	Construction Au	Ithorizati	ion		
	(Required for Build	ding Permit)			
The construction and installation requirements of Rules .1950, .1952, .1 with the attached system layout.	954, .1955, .1956, .1957, .1958. and .1959	are incorporated by	y references in	ito this permit and shall be met. Systems	shall be installed in accordance
ISSUED TO: JUSTIN HORCUM	PROPERT	Y LOCATION:	BRP	E DRIVE RAE BRAE	
Facility Type: 550 (65' ~39')	SUBDIVIS	ION Ros:	s m	RAE BRAE	LOT # 6
		ision	Repair		
Basement? 🗆 Yes 🔀 No Basement Fixe					
	KIONAL			(Initial) Wastewater Flow:	360 GPD
(See note below, if applicable  )					<u></u>
Conver	SIONAL	(Repair)			
Installation Requirements/Conditions	Number of trenches $\_$				
Septic Tank Size <u>VOOO</u> gallons	Exact length of each trench	75	feet	Trench Spacing:	Feet on Center
Pump Tank Size gallons	Trenches shall be installed on o			Soil Cover: <u>C-24</u> i	
-	Maximum Trench Depth of:			(Maximum soil cover shall r	
	(Trench bottoms shall be level			36" above the trench bott	
	in all directions)			20 above the trench DOLL	vinj
Pump Requirements:ft. TDH vs	_ GPM			G	inches below pipe

Conditions: WATER LINE MUST BE 10 FROM SEPTIC SYSTEM. NO VTILITIES 12 inches above pipe MAY ENCROPEND ON INITIAL OR REPAIR AREA.



BRAE DRIVE